



# INDIANA OFFICER'S SUPPLEMENTAL TRUCK AND BUS CRASH REPORT

State Form 44811 (R2 / 6-94) ISP stock number 302T

Mail Original To: Indiana State Police, Motor Carrier Division  
100 N. Senate Ave., Indianapolis, IN 46204

## OFFICE USE ONLY

Safetynet Crash ID Number

I N

WHEN TO USE FORM: Answers to questions below determine use of form.

### Did this crash involve a:

1. truck with at least 2 axles, 6 tires or hazmat placard; or
2. bus with seats for more than 15 people, including driver?

**STOP - If response to 1 and 2 is "No", do not fill out form.**

3. Person(s) fatally injured?
4. Injured person(s) taken away for medical attention?
5. Vehicle(s) towed from scene?

**STOP - If response to 3, 4 and 5 is "No", do not fill out form.**

**If response is "Yes" to 3, 4 or 5 fill out form.**

## REPORTING AGENCY'S CRASH ID NUMBER

A. CARRIER'S US  
D.O.T. NUMBER

B. STATE NUMBER

C. ISSUING STATE

D. NO CARRIER ID

E. INTERSTATE

F. ICC NUMBER

G. CARRIER'S NAME

H. CARRIER'S STREET ADDRESS (principal place of business)

I. CITY

J. STATE

K. ZIP CODE

L. SOURCE OF CARRIER'S NAME

M. CRASH DATE

N. CRASH TIME (24 HOUR)

1. Side of vehicle
2. Shipping papers
3. Driver
4. Log book

O. CRASH LOCATION

P. CRASH CITY / MUNICIPALITY

Q. CRASH COUNTY

R. STATE

S. DRIVER'S NAME

Last

First

MI

T. DRIVER'S DATE OF BIRTH

U. DRIVER'S LICENSE NUMBER

V. LICENSE STATE

W. VEHICLE CONFIGURATION

X. CARGO BODY TYPE

1. Bus (seat for > 15 people, including driver)
2. Single-unit truck (2 axle, 6-tire)
3. Single-unit truck (3 or more axles)
4. Truck / Trailer
5. Truck Tractor (bobtail)
6. Tractor / semitrailer
7. Tractor / double
8. Tractor / triple
9. Unknown truck, cannot classify

1. Bus (seats for > 15 people, including driver)
2. Van / Enclosed Box
3. Cargo Tank
4. Flatbed
5. Dump
6. Concrete Mixer
7. Auto Transporter
8. Garbage / Refuse
9. Other

Y. NUMBER OF AXLES  
(including trailers)

Z. GROSS VEHICLE  
WEIGHT RATING

AA. VEHICLE IDENTIFICATION NUMBER

BB. VEHICLE LICENSE NUMBER

CC. LICENSE  
STATE

DD. HAZARDOUS  
MATERIALS PLACARDED

EE. HAZMAT  
RELEASE OF CARGO

FF. HAZMAT PROPER SHIPPING NAME

GG. HAZMAT  
4-DIGIT ID NO.

HH. HAZAR  
CLASS N

## II. REPORTING AGENCY

JJ. OFFICER BADGE  
OR PE NUMBER

KK. TOTAL NUMBER  
CRASH VEHICLES

LL. SEQUENCE OF EVENTS

1st

2nd

3rd

4th

MM. TRAFFIC WAY

1. Not physically divided (two-way trafficway)
2. Divided highway, median strip, w/o traffic barrier
3. Divided highway, median strip, w / traffic barrier
4. One way trafficway

NN. ACCESS CONTROL

1. No control (unlimited access)
2. Full control (only ramp entry and exit)
3. Other

OO. WEATHER CONDITIONS

1. No adverse condition
2. Rain
3. Sleet, hail
4. Snow
5. Fog
6. Blowing sand, soil, dirt or snow
7. Severe crosswinds
8. Other
9. Unknown

PP. ROAD SURFACE CONDITION

1. Dry
2. Wet
3. Snow or slush
4. Ice
5. Sand, mud, dirt or oil
6. Other
7. Unknown

QQ. LIGHT CONDITION

1. Daylight
2. Dark - not lighted
3. Dark - lighted
4. Dawn
5. Dusk
6. Unknown

RR. APPARENT DRIVER CONDITION

1. Appeared normal
2. Had been drinking
3. Illegal drug use
4. Sick
5. Fatigue
6. Asleep
7. Medication
8. Unknown

SS. NUMBER OF FATALITIES

TT. NUMBER OF INJURIES

UU. TOW AWAY

VV. FEDERALLY REPORTABLE

WW. STATE REPORTABLE

Signature of officer

PRINTED NAME OF OFFICER (last, first, MI)